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JUN 08 2006

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FACSIMILE COVER SHEET**TO:** Examiner: David Faber
Group Art Unit: 2178**FROM:** John D. Magluyan, Reg. No. 56,867**RE:** U.S. Application No. 09/826,935
Attorney Docket No. 00169.002014**FAX NO.:** (571) 273-8300**DATE:** June 8, 2006**NO. OF PAGES:** 22
(including cover page)**TIME:** 5:04 pm**SENT BY:** Charise**MESSAGE**

Attached are the following papers for the above-identified application:

1. Amendment; and
2. Transmittal for Amendment.

I hereby certify that this correspondence is being transmitted via facsimile
to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-
1450, (571) 273-8300, on:

June 8, 2006

(Date of Deposit)

John D. Magluyan, Reg. No. 56,867
(Name of Attorney for Applicants)

Signature

June 8, 2006

Date of Signature

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In re Application of:

DANIEL J. LLOYD-JONES, ET AL.

Application No.: 09/826,935

Filed: April 6, 2001

For: A METHOD OF ANNOTATING AN IMAGE

Docket No.

00169.002014.

Examiner: David Faber

Group Art Unit: 2178

Date: June 8, 2006

Mail Stop Amendment
THE COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	48	MINUS	84	= 0	x \$25 \$50	\$.00
INDEP. CLAIMS	4	MINUS	5	= 0	x \$100 \$200	\$.00
Fee for Multiple Dependent claims \$180°/\$360						\$.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$.00


- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

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- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



John D. Magluyan
Attorney for Applicants
Registration No.: 56,867FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3800
Facsimile: (212) 218-2200

Form #120

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00169.002014.

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
: Examiner: David Faber
DANIEL J. LLOYD-JONES, ET AL.)
: Group Art Unit: 2178
Application No.: 09/826,935)
: Filed: April 6, 2001)
: For: A METHOD OF)
ANNOTATING AN IMAGE : June 8, 2006

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action dated March 8, 2006, please amend the
above-identified application, as follows:

Thereby certify that this correspondence is being transmitted via facsimile
to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-
1450, (571) 273-8300, on:

June 8, 2006

(Date of Deposit)

John D. Maghuyan, Reg. No. 56,867

(Name of Attorney for Applicants)


SignatureJune 8, 2006

Date of Signature